



01-17-03

1631

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**TRANSMITTAL  
FORM**(To be used for all correspondence  
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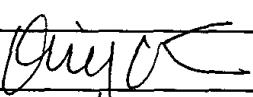
|                      |                   |
|----------------------|-------------------|
| Application Number   | 09/778,026        |
| Filing Date          | February 5, 2001  |
| First Named Inventor | Orest W. Blaschuk |
| Group Art Unit       | 1631              |
| Examiner Name        | Marianne P. Allen |
| Attorney Docket No.  | 100086.402C1      |

**ENCLOSURES (check all that apply)**

|  |  |  |
|--|--|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form                           | <input type="checkbox"/> Assignment Papers<br>(for an Application)                             | <input type="checkbox"/> CD(s), Number<br>of CD(s) _____   |
| <input checked="" type="checkbox"/> Fee Attached                                   | <input type="checkbox"/> Drawing(s) (16 sheets)  | <input type="checkbox"/> After Allowance<br>Communication to Group                               |
| <input type="checkbox"/> Amendment/Response  | <input type="checkbox"/> Request for Corrected Filing<br>Receipt                               | <input type="checkbox"/> Appeal Communication to<br>Board of Appeals and<br>Interferences        |
| <input type="checkbox"/> After Final   | <input type="checkbox"/> Licensing-related Papers  | <input type="checkbox"/> Appeal Communication to<br>Group (Appeal Notice, Brief,<br>Reply Brief) |
| <input type="checkbox"/> Affidavits/declaration(s)                                 | <input type="checkbox"/> Petition  | <input type="checkbox"/> Proprietary Information   |
| <input checked="" type="checkbox"/> Extension of Time Request                      | <input type="checkbox"/> Petition to Convert to a<br>Provisional Application                   | <input type="checkbox"/> Status Letter   |
| <input type="checkbox"/> Express Abandonment<br>Request                            | <input type="checkbox"/> Power of Attorney,<br>Revocation, Change of<br>Correspondence Address | <input checked="" type="checkbox"/> Return Receipt Postcard                                      |
| <input type="checkbox"/> Information Disclosure<br>Statement; Form PTO-1449        | <input type="checkbox"/> Declaration   | <input checked="" type="checkbox"/> Additional Enclosure(s)<br>(please identify below):          |
| <input type="checkbox"/> Cited References  | <input type="checkbox"/> Statement under 37 CFR<br>3.73(b)                                     | <u>Response to Restriction</u>   |
| <input type="checkbox"/> Certified Copy of Priority<br>Document(s)                 | <input type="checkbox"/> Terminal Disclaimer   | <u>Requirement</u>   |
| <input type="checkbox"/> Response to Missing Parts<br>under 37 C.F.R. 1.52 or 1.53 | <input type="checkbox"/> Small Entity Statement  | <u>Copy of Limited Recognition</u>   |
| <input type="checkbox"/> Response to Missing<br>Parts/Incomplete Application       | <input type="checkbox"/> Request for Refund  |  |

Remarks

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

|                 |   |   |
|-----------------|---|---|
| Individual Name | Qing Lin, Ph.D.   | <br>00500<br>PATENT TRADEMARK OFFICE |
| Signature       |  |   |
| Date            | 1/15/03   |   |

**CERTIFICATE OF MAILING**

|   |                  |       |
|---|------------------|-------|
| I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231 on the date specified below. |                  |       |
| Typed or printed name   | Judith A. Breaks |       |
| Signature   |                  | Date: |

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**FEE TRANSMITTAL  
for FY 2003**

Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27.TOTAL AMOUNT OF PAYMENT (\$) **55.00**

## Complete if Known

|                      |                   |
|----------------------|-------------------|
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| First Named Inventor | Orest W. Blaschuk |
| Examiner Name        | Marianne P. Allen |
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## METHOD OF PAYMENT

☒ Payment Enclosed:  
☒ Check ☐ Credit card ☐ Money Order ☐ Other☐ Deposit Account:Deposit  
Account  
Number

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PLLC

The Commissioner is authorized to (check all that apply)

☐ Charge fee(s) indicated below ☒ Credit any overpayments☐ Charge any additional fee(s) during the pendency of this application☐ Charge fee(s) indicated below, except for the filing fee☒ Charge any deficiencies

to the above-identified deposit account.

## FEE CALCULATION

## 1. BASIC FILING FEE

| Large Entity |          | Small Entity |          | Fee Description        | Fee Paid |
|--------------|----------|--------------|----------|------------------------|----------|
| Fee Code     | Fee (\$) | Fee Code     | Fee (\$) |                        |          |
| 1001         | 750      | 2001         | 375      | Utility filing fee     |          |
| 1002         | 330      | 2002         | 165      | Design filing fee      |          |
| 1003         | 520      | 2003         | 260      | Plant filing fee       |          |
| 1004         | 750      | 2004         | 375      | Reissue filing fee     |          |
| 1005         | 160      | 2005         | 80       | Provisional filing fee |          |
| SUBTOTAL (1) |          |              |          |                        | (\$)     |

## 2. EXTRA CLAIM FEES

| Total Claims       | Extra Claims | Fee from below | Fee Paid |
|--------------------|--------------|----------------|----------|
|                    |              |                |          |
| Independent Claims |              |                |          |
| Multiple Dependent |              |                |          |

| Large Entity |          | Small Entity |          | Fee Description  |
|--------------|----------|--------------|----------|--|
| Fee Code     | Fee (\$) | Fee Code     | Fee (\$) |  |
| 1202         | 18       | 2202         | 9        | Claims in excess of 20                                     |
| 1201         | 84       | 2201         | 42       | Independent claims in excess of 3                          |
| 1203         | 280      | 2203         | 140      | Multiple dependent claim, if not paid                      |
| 1204         | 84       | 2204         | 42       | ** Reissue independent claims over original patent         |
| 1205         | 18       | 2205         | 9        | ** Reissue claims in excess of 20 and over original patent |

SUBTOTAL (2)

(\$)

\*\*or number previously paid, if greater; For Reissues, see above

## FEE CALCULATION (continued)

## 3. ADDITIONAL FEES

| Large Entity |          | Small    |          | Fee Description  |
|--------------|----------|----------|----------|--|
| Fee Code     | Fee (\$) | Fee Code | Fee (\$) |  |
| 1051         | 130      | 2051     | 65       | Surcharge - late filing fee or oath  |
| 1052         | 50       | 2052     | 25       | Surcharge - late provisional filing fee or cover sheet.                    |
| 1053         | 130      | 1053     | 130      | Non-English specification  |
| 1812         | 2520     | 1812     | 2520     | For filing a request for ex parte reexamination                            |
| 1804         | 920*     | 1804     | 920*     | Requesting publication of SIR prior to Examiner action                     |
| 1805         | 1840*    | 1805     | 1840*    | Requesting publication of SIR after Examiner action                        |
| 1251         | 110      | 2251     | 55       | Extension for reply within first month                                     |
| 1252         | 410      | 2252     | 205      | Extension for reply within second month                                    |
| 1253         | 930      | 2253     | 465      | Extension for reply within third month                                     |
| 1254         | 1450     | 2254     | 725      | Extension for reply within fourth month                                    |
| 1255         | 1970     | 2255     | 985      | Extension for reply within fifth month                                     |
| 1401         | 320      | 2401     | 160      | Notice of Appeal   |
| 1402         | 320      | 2402     | 160      | Filing a brief in support of an appeal                                     |
| 1403         | 280      | 2403     | 140      | Request for oral hearing   |
| 1451         | 1510     | 1451     | 1510     | Petition to institute a public use proceeding                              |
| 1452         | 110      | 2452     | 55       | Petition to revive - unavoidable   |
| 1453         | 1300     | 2453     | 650      | Petition to revive - unintentional   |
| 1501         | 1300     | 2501     | 650      | Utility issue fee (or reissue)   |
| 1502         | 470      | 2502     | 235      | Design issue fee   |
| 1503         | 630      | 2503     | 315      | Plant issue fee  |
| 1460         | 130      | 1460     | 130      | Petitions to the Commissioner  |
| 1807         | 50       | 1807     | 50       | Processing fee for provisional applications                                |
| 1806         | 180      | 1806     | 180      | Submission of Information Disclosure Stmt                                  |
| 8021         | 40       | 8021     | 40       | Recording each patent assignment per property (times number of properties) |
| 1809         | 750      | 2809     | 375      | Filing a submission after final rejection (37 CFR § 1.129(a))              |
| 1810         | 750      | 2810     | 375      | For each additional invention to be examined (37 CFR § 1.129(b))           |
| 1801         | 750      | 2801     | 375      | Request for Continued Examination (RCE)                                    |
| 1802         | 900      | 1802     | 900      | Request for expedited examination of a design application                  |

Other fee (specify) \_\_\_\_\_

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$) 55

## SUBMITTED BY

|                   |                 |                                 |                         |
|-------------------|-----------------|---------------------------------|-------------------------|
| Name (Print/Type) | Qing Lin, Ph.D. | Registration No. Attorney/Agent | See Limited Recognition |
| Firm Name/Address |                 |                                 |                         |
| Signature         | <i>Qing Lin</i> | Date                            | 1/15/03                 |



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